

CMS Net

MEDS User Guide

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Preface

Legend

In procedures on the following pages users will see various symbols used.

- ✓ When a procedure is described, the check mark indicates the result of an action.
 - ➡ The arrow indicates a content note.
-

CCS Modifications

CCS Changes

The modifications to include California Children Services (CCS) and Genetically Handicapped Persons Program (GHPP) Client Eligibility were added to Medi-Cal Eligibility Data System (MEDS).

CCS client information is available on MEDS.

GHPP client eligibility will be available on MEDS when the changes to client eligibility in the GHPP system are implemented.

The CCS and GHPP Client Eligibility is being added to MEDS prior to use by the Fiscal Intermediaries to adjudicate CCS and GHPP claims.

Background

The CCS program, a federally mandated public health program, provides specialized medical services to financially and medically eligible children *under* twenty-one (21) years of age with severe handicapping health conditions. These are primarily diagnostic, treatment, and therapy services.

GHPP, an entirely state-funded program, provides services to persons twenty-one (21) years of age and older who have specific genetic conditions such as Hemophilia, Cystic Fibrosis, etc.

The CCS/GHPP case management involves comprehensive tracking beginning with a client's initial contact, eligibility, provider approval, authorization for care, treatment, follow-up, and continued care referrals.

Client Identifier

The CMS-Net and GHPP systems require the use of the Client Identification Number (CIN) for all CCS/GHPP clients. The CIN is the primary client identifier to establish eligibility in both CMS-Net and GHPP systems.

Counties access the Statewide Client Index (SCI) via CMS-Net and GHPP systems to acquire a CIN for their client if needed.

CMS-Net and GHPP use the Common Application Transaction System (CATS) for this existing process.

Continued on next page

CCS Modifications, Continued

County ID

The CCS/GHPP County ID is composed of the following:

- Responsible County code
- CCS aid code
- a '9'
- The CIN.

This county ID is only *stored* on the MEDS County Cross-reference file. It is not displayed on the main MEDS inquiry screens.

The county and aid code on MEDS for the CCS ONLY client will have no meaning for CCS since CCS day-specific eligibility exists on HAP.

Nightly Updates

Nightly, the CMS-Net systems will send CCS eligibility updates to MEDS using the CIN as the identifier. Since CCS eligibility is day-specific, not month-specific like Medi-Cal, there are two processes required to update eligibility.

CMS-Net will send transactions to update the following information on MEDS:

- | | |
|--|---------------------------------|
| • CMS eligibility (by using the Known to CMS Indicator and the Notify CMS Indicator) | • Name |
| • Date of Birth | • Sex |
| • Residence Address | • Mailing Address |
| • Phone Number | • Ethnicity |
| • Language | • Alias Name |
| • Address Verification Flag | • SSN |
| • County of Responsibility | • County of Residence |
| • Aid Code | • Other Health Coverage on MEDS |

Note:

In the second phase of Client Eligibility, CMS-Net will send transactions to update the associated Health Insurance System (HIS) database with the clients other health insurance information.

Continued on next page

CCS Modifications, Continued

Type of Updates

When a CCS transaction updates MEDS there are limits to what the transaction can update based on the existing MEDS record.

Full Update

If a current MEDS record already exists and there is **no** Current or **no** Ongoing eligibility present for Medi-Cal Clients or Food Stamps Clients, CCS transactions perform a full update to MEDS.

The system will update all fields listed in the Nightly Updates section on the previous page.

Limited Update

A limited update to MEDS occurs if a current MEDS record already exists for the client and there **is** ongoing or current Medi-Cal or Food Stamp eligibility present.

Ongoing or Current Medi-Cal Client

On limited updates for Ongoing or Current Medi-Cal Clients, the system will NOT update the following fields on MEDS.

- Name
- Mailing Address
- Sex
- Date of Birth
- County of Responsibility
- Residence Address
- Mailing Address Verification Flag
- SSN
- Aid Code

Ongoing or Current Food Stamps Client

On limited updates for Ongoing or Current Food Stamps Clients, the system will NOT update the following fields on MEDS.

- Name
- Sex
- SSN
- Date of Birth
- Aid Code
- County of Responsibility

Continued on next page

CCS Modifications, Continued

**CCS Data
Added to
MEDS**

The addition of data specifically for CCS/GHPP clients to the MEDS system involves the following functions:

1. Inquiry and add/update capabilities to MEDS, and Health Access Programs (HAP) from the CMS-Net system
2. Benefits Identification Card (BIC) issuance for CCS only clients
3. Access to timely CCS eligibility information by all users of the MEDS and the Point of Service (POS) system.

**Purpose of
Data**

The new CCS data within MEDS will be used:

1. To maximize CCS dollars by having program eligibility verified by the automated systems versus the current manual methods,
2. In issuing service authorizations,
3. By providers in eligibility inquiries via POS, and
4. By EDS CA-MMIS and Delta Dental CD-MMIS fiscal intermediaries in the adjudication of CCS claims.

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CCS Modifications, Continued

**Update Client
Information
Process**

The first eligibility process is to update client information:

1. Update the MEDS database with the client identification information.
2. No information verifying CCS eligibility will be carried on the MEDS database.
 - Adding CCS client identification information to MEDS will generate the Benefits Identification Card (BIC) for the client (if not already issued), and
 - A new MEDS record will be generated if none currently exists on MEDS.
 - CMS will be able to request replacement BICs.
3. A non-expiring, Known to CMS Indicator and CMS Notification flag will be added to MEDS for the CCS client that will be visible on the MEDS INQE screen.
4. When the client is CCS ONLY, in addition to the two CMS indicators, MEDS will have in the primary eligibility segment:
 - MEDS ID
 - CIN
 - Client identification information, such as Name, DOB, Sex, Address and Phone number
 - A CCS aid code
 - Eligibility status 999
 - The responsible county
 - A Government Responsibility Code (GRC) code of '6'.

Continued on next page

CCS Modifications, Continued

**Day Specific
Updates
Process**

The second eligibility process is to update the day-specific CCS eligibility information on the HAP database.

- The CMS-Net systems will update these HAP CCS eligibility tables nightly.
 - Users can view the HAP eligibility in MEDS by using the Health Access Programs (HAP) Inquiry Menu (HEMI screen).
- The MEDS and HAP CCS information will be accessible via the Point of Service (POS) network response and via MEDS on a new screen.
- The Fiscal Intermediary Access to Medi-Cal Eligibility (FAME) file will carry the CMS indicator, but no CCS eligibility.

A separate extract file from HAP of the CCS eligibility will be made available to the Medi-Cal managed care plans.

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CCS Modifications, Continued

POS Messages

- If the CCS ONLY client has Medicare other health coverage, those messages will display.
- When the future date of service is invalid for determining day-specific eligibility, a new POS message displays:

`'No HAP eligibility for Date of Service entered'`

- When determining a day-specific eligibility:
 - If the current or history date-of-service is invalid, the following POS message displays:

`'No recorded eligibility for MM/YYYY'`

[where the MM/YYYY is the month and year in which the date of service falls]

- If the HAP database is unavailable to verify CCS eligibility, this message displays:

`'HAP system unavailable'`

Continued on next page

CCS Modifications, Continued

**Aid Codes and
POS Messages**

The CCS eligibility POS messages are listed in the table below.

| Aid Code | Eligibility | Benefits | Message |
|-----------------|--|--|--|
| 9K | CCS eligible | CCS Benefits Diagnosis Treatment Therapy | CCS eligible. CCS prior authorization required for CCS services |
| 9R | CCS eligible (HF over CCS financial eligibility) CCS benefits | CCS Benefits Diagnosis Treatment Therapy | CCS eligible. CCS prior authorization required for CCS services |
| 9M | CCS eligible Medical Therapy Program Only | CCS Benefits Therapy | CCS eligible for Medical Therapy Program services only. CCS prior authorization required for CCS services |
| 9N | CCS Medi-Cal Benefits Only | Medi-CAL Benefits Diagnosis Treatment | CCS eligible. CCS prior authorization required for CCS services |

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CCS Modifications, Continued

Generate a BIC

The logic for generating a Benefits Identification Card (BIC) for CCS clients is also impacted by the restrictions on a **full** or **limited** update to MEDS.

- If the name on the transaction doesn't match MEDS, a BIC will still be generated.
 - If the date of birth (DOB) doesn't match exactly, but the DOB passes MEDS file clearance edits, and there is no new DOB on the transaction, a BIC will be generated.
-

Access to HEMI

In CMS-Net, users can gain entry to the Health Access Programs Inquiry Menu (CCS/GHPP) from a variety of screens:

- Inquiry Request Menu
 - Recipient Inquiry Request Menu
 - INWA screen [Online Worker Alert Summary]
-

Continued on next page

CCS Modifications, Continued

CMS Indicator The CMS Indicator describes if the client is known to the CCS systems. Valid values are:

- 0 - Removed
- 1 - Known to CCS Only
- 2 - Known to GHPP Only
- 3 - Known to CCS and GHPP.

CMS Notification flag

The CMS Notification flag is used to determine when to send MEDS changes on CCS clients to CMS. Valid values are:

- Y - Keep notifying CMS of changes to the client, and
- N - Do not notify CMS any longer of changes to this client.

The INQE screen displays OTHER CLIENT ELIGIBILITY INFORMATION. The CMS Indicators field below displays the notification flag.

```

INQE          ** OTHER CLIENT ELIGIBILITY INFORMATION **          BWR - 03/07/01

MEDS-ID 656-01-0065          BIRTHDATE 05-02-1990          CLIENT-INDEX-NO 90001870S 9
NAME RECORDSIXTEEN , FOODSTAMP A          PHONE

ELIG-APPROVAL-DATE          SSI-LAST-RECEIVED
EXPECTED-DELIVERY-DATE          PICKLE-TICKLER
DEATH-POSTED          LAST-PICKLE-CHG

SSN-VER-BIRTHDATE          REF/ALIEN-IND          ALIEN-ELIG
ETHNIC          INS-ENTRY-DATE          ALIEN-SPONSOR-STAT
LANGUAGE          COUNTRY-OF-ORIGIN          ALIEN-NO

PGM:  M          1          2          3          FS C H CW
          2001====> 2000=====>
          03-01 PEND JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC
ORIG-AID
NEG-ACTN
MULTI-SOC
RES-COUNTY 35
HF-DAYS
ST/FED-IND

OPTION ___ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST
    
```

MEDS Alerts

Overview

MEDS Alerts notify CCS workers of the outcome of CMS Net updates to MEDS.

- May or may not require follow-up action by CCS county, Welfare county, or other automated system that interfaces with MEDS
 - Available for online viewing in MEDS
 - Available in hardcopy format via U.S.P.S. delivery
-

Types of MEDS Alerts

MEDS Alerts consist of GZ transactions. GZ Transactions are batch processes that occur behind the scenes in the system. They will trigger transactions to MEDS and each has a specific function.

- GZ10, GZ12, GZ20: Alerts for MEDS transactions that are submitted by CMS Net.
 - GZ99: Alerts for MEDS transactions that are submitted by Welfare departments, Healthy Families administrative vendor, ISAWS, and other MEDS interfaces.
-

Transaction Functionality

- GZ10 – will add changes or will delete an SSN in MEDS
 - GZ12 – will change CMS Indicators
 - GZ20 - will add or update patient eligibility and demographics.
 - GZ99 - apply only to clients that have CCS eligibility on MEDS and are reported by the legal county in which the MEDS client belongs.
-


Continued on next page

MEDS Alerts, Continued

Screen Example

GZ Transactions display on MEDS screens. The example below displays a MEDS record after CMS Net update.

| | | | |
|--|------------------------------------|--------------------------------|--|
| INQD ** CHANGE DATES AND AUTHORIZED REP. INFORMATION ** BWR - 03/30/01 | | | |
| MEDS-ID 200-17-0201 | BIRTHDATE 06-05-1991 | CLIENT-INDEX-NO 93051101A 0 | |
| BASEGZ , TWELVE | A SR | CA-DL/ID-NO M9011042 | |
| CURRENT | FIRSTNAME A AUTH REP LAST NAME MRS | | |
| AUTHORIZED | REP ADDR FIELDS | | |
| REPRESENTATIVE | 2190 MARKET STREET | | |
| | LOS ANGELES CA 90021-9876 | FLAG | |
| LAST-MC/CP-CHG 03-01-2001 | LAST-FS-CHG | LAST-OTHER-CHG 03-29-2001 | |
| LAST-MC/CP-TRANS EW12 B | LAST-FS-TRANS | LAST-OTHER-TRANS GZ20 B | |
| FILE-FIX-DATE | | | |
| OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST | | | |



MEDS Inquiry Menu


MEDS Inquiry Request Menu Screen

Use the MEDS Inquiry Request Menu to access the HAP Inquiry Menu. Do one of the following:

| Step | Action |
|------|--|
| 1 | In the OPTION field type "G" and press <Enter>. OR |
| 2 | Place the cursor anywhere on the line of the "Health Access Programs Inquiry Menu (CCS/GHPP)" option and press <Enter>. OR |
| 3 | Place the cursor in the field to the left of the "Health Access Programs Inquiry Menu (CCS/GHPP)" option, type any alphabetic character and press <Enter>. OR |
| 4 | From a <u>blank</u> screen, type the transaction code HEMI, and press <Enter>. |

"G" Option Access

From the MEDS Inquiry Request Menu In the OPTION field type "G" and press <Enter>.



```

MENU                                ** INQUIRY REQUEST MENU **                BPT - 03/14/00

OPTION  ?
(PF12)  R = INQR - MEDS RECIPIENT INQUIRY BY ID NUMBER
(PF22)  N = INQN - MEDS RECIPIENT INQUIRY BY NAME
        C = INCI - HEALTH SERVICES STATEWIDE CLIENT INDEX INQUIRY
(PF23)  W = INQW - MEDS CASE MEMBER INQUIRY
(PF21)  X = INXR - MEDS CROSS REFERENCE FILE INQUIRY
        S = SOCR - SHARE OF COST SPENDDOWN CASE MEMBERS/STATUS
        P =      - MEDS IMMEDIATE NEED ELIGIBLE RECORD (FUTURE)
        T = INXT - MEDS IMMEDIATE NEED COUNTY ID CROSS REFERENCE

(PF20)  A = INWA - MEDS WORKER ALERTS
        H = HOLD - MEDS WORKER ALERTS FOR "HOLD" RECORDS
(PF19)  I = IEVS - INCOME/ELIGIBILITY VERIFICATION SYSTEM MENU
        O = HOME - HOMELESS ASSISTANCE PROGRAM MENU
        V = HIAR - HEALTH INSURANCE SYSTEM MENU
        G = HEMI - HEALTH ACCESS PROGRAMS INQUIRY MENU (CCS/GHPP)
        Y = TRAC - TRAC INFORMATION SYSTEM MAIN MENU (PRODUCTION)
        Z = TRAT - TRAC INFORMATION SYSTEM MAIN MENU (TRAINING)
        M = MOPI - PROVIDER ELIGIBILITY VERIFICATION RESPONSE (POS)

FOR DETAILED EXPLANATIONS OF THE INQUIRY OPTIONS LISTED PRESS PF13
  
```

Continued on next page

The Resulting Health Access Programs Inquiry Menu (HEMI) screen displays.



HAP Eligibility displays on the View CCS Information screen.

| Step | Action |
|------|--|
| 1 | Type “C” at the Inquiry Option. |
| 2 | Type the MEDS ID or Client Index Number for the CCS Client. Press <Enter>. |

Revised 02/09/04

MEDS Inquiry Menu, Continued

**View CCS
Information
Screen**

The “View CCS Information” screen will display MEDS and HAP information for CCS patients.

```

*** VIEW CCS INFORMATION ***          BSU - 03/14/00

DOE           , JANE           T   DOB:  11-23-1971   MEDS-ID:131 11 1111
C/O BARBARA DOE           SEX:  F           CIN:  92343434A
9999 ALMOND STREET           CURR-MCARE-STATUS:  HIC-NO:
CHICO           95928           BIC-ISSUE: 05-07-98 PAPER-ISSUE:
DEATH-DT:           DEATH-CD:  KNOWN-TO-CMS: 1       NOTIFY-CMS:  Y
BENE-PHONE:  (530) 978-4343   CURR-OHC:  K
PGM: M C H   1           2           3           FS           CW

CCS DATA:  # SEGMENTS RETURNED: 010          # SEGMENTS FOUND: 010
              AID CODE      COUNTY      START DATE      END DATE
              9K            34           01/01/2000      01/31/2000
              9K            34           12/01/1999      12/30/1999
              9M            34           11/01/1999      11/30/1999
              9N            43           09/10/1999      09/15/1999
              9K            43           08/01/1999      09/09/1999
              9K            43           06/01/1999      07/31/1999
              9K            43           06/01/1998      05/31/1999
              9K            43           06/01/1997      05/31/1998
              9K            43           06/01/1996      05/31/1997
              9K            43           06/01/1995      05/31/1996
REQUESTED-ID: 92343434A          PF13 = HELP

ACTION _ (N = NEXT, P=PREV, G = HAP INQUIRY MENU, M = MEDS INQUIRY)

```

Action Values

| Action | Definition |
|----------------------|--|
| N =NEXT: | Will display the next page of CCS or GHPP HAP segments found (if any additional segments to display). |
| P = PREV: | Will display the previous page of CCS or GHPP HAP segments (if a previous page had already been displayed). |
| G =HAP INQUIRY MENU: | Will return to the HAP Inquiry Menu. |
| M =MEDS INQUIRY: | Will display the MEDS PRIMARY MEDI-CAL/CMSP INFORMATION screen (INQM) for the given MEDS ID. From this screen, the user can then view all of the other MEDS screens. |

Continued on next page

MEDS Inquiry Menu, Continued

**Help Screen
for the MEDS
Inquiry
Request Menu**

When the user presses <PF13> Help key, the following screen displays. This screen lists the valid options and instructions for using the Inquiry Request Menu.

```

MENU                                ** INQUIRY REQUEST MENU **                                BTP - 03/08/00

OPTION  ?
( +-----+
( | The transactions listed on the MENU screen can be selected |
( | using any of the following methods:                        |
( |                                                             |
( | *1* Enter the letter corresponding to one of the highlighted |
( | options in the OPTION field and then press ENTER.          |
( | The valid options are: R,N,C,W,X,S,T,A,H,I,O,V,G,Y,Z,M. |
( | *2* Position the cursor anywhere on the line of the desired |
( | option and press ENTER.                                     |
( | *3* Enter any alphabetic character in the field to the left of |
( | the desired option and press ENTER.                         |
( |                                                             |
( | In addition, these two universal methods can be used:      |
( |                                                             |
( | *** Press the PF key identified next to the option. PF keys |
( | are available for options R, N, W, X, A, and I.             |
( | *** Clear the screen (press CLEAR) and enter the 4 character |
( | transaction code listed to the right of the option.         |
( |                                                             |
( | F7=Prev   F8=Next                               Press CLEAR to return to MENU |
( +-----+

```

Recipient Inquiry Request

Recipient Inquiry Request Screen (INQR)

A second way to gain entry to the Health Access Programs Inquiry Menu from a MEDS inquiry screen is through the MEDS RECIPIENT INQUIRY REQUEST menu shown below. Access this screen by pressing <PF12>.

Step 1

From this screen, user selects one of the inquiry options for a given ID.

In this example, select "M" (Medi-Cal/CMSP – Primary) with Client Index Number (CIN) 90002960D.

| INQR ** RECIPIENT INQUIRY REQUEST ** | |
|---|--|
| SELECT INQUIRY OPTION m | A = ADDRESS INFORMATION B = BUY-IN AND BENDEX C = OTHER HEALTH COVERAGE D = CHANGE DATES AND AUTH. REP. INFORMATION E = OTHER CLIENT ELIGIBILITY INFORMATION F = FOOD STAMP G = FOOD STAMP ABAWD CALENDAR H = HEALTH CARE PLANS 1 THROUGH 3 I = HEALTH CARE PLANS 4 AND 5 J = HEALTH CARE PLANS -- 13-15 MONTHS PRIOR K = HEALTH CARE PLAN CAPITATION INFORMATION M = MEDI-CAL/CMSP -- PRIMARY P = PENDING/DENIED APPLICATIONS & APPEALS T = WELFARE TRACKING X = TITLE XVI -- SSI/SSP 1 = MEDI-CAL/CMSP -- SPECIAL PROGRAM 1 2 = MEDI-CAL/CMSP -- SPECIAL PROGRAM 2 3 = MEDI-CAL/MMSP -- SPECIAL PROGRAM 3 4 = MEDI-CAL/CMSP -- PENDING 5 = MEDI-CAL/CMSP -- FUTURE PENDING 6 = MEDI-CAL/CMSP -- 13-15 MONTHS PRIOR |
| RECIPIENT IDENTIFICATION: (ENTER ONE) | |
| MEDS-ID: _ _ _ _ | |
| COUNTY-ID: _ _ _ _ _ | |
| HIC-NO: _ _ _ _ _ | |
| CLIENT-INDEX-NO: 90002960D | |
| CA-DL/ID-NO: ***** | |
| ALIEN-NO: ***** | |

Continued on next page

Recipient Inquiry Request, Continued

Inquiry Medi-Cal Screen

The resulting INQM screen is displayed for the entered CIN.

Step 2

User enters "HE" in the OPTION field to display the Health Access Programs Inquiry Menu.

➡ Notice the MEDS ID that corresponds to CIN 90002960D is 154-02-1152

```

INQM                ** PRIMARY MEDI-CAL/CMSP INFORMATION **          BTP - 03/08/00

CASE-NAME TEST CASE                DISTRICT MCR          KDELO          , ADDCUR      M
COUNTY-ID 02-30-1541152-0-01      EW-CODE M515        C/O EW20 ONLINE
MEDS-ID 154-02-1152  SSN-VER 3    REDETERM-MO        ADD CUR MO CMSPCNTY
BIRTHDATE 09-05-1969      SEX M      GOVT-RESP 1      MI SAME UPD          95814
CHAINED-ID                LAST-MC/CP-CHG 04-01-00        ADDRESS-FLAG      RES-COUNTY
PRIOR-MEDS-ID            LAST-OTH-CHG                    APDP      PICKLE      RECOVERY
WELFARE-PGM 003      DEATH-DT                DEATH-CD      TERM-DT                TERM-REAS
CIN 90002960D 8      HIC-NO                BIC-ISSUE 04-01-00 PAPER-ISSUE
PGM:  M C H      1                2                3                FS                CW C H
                2000=====> 1999=====>
      05-00 PEND  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC
COUNTY      02                02                01  01
AID-CODE     30                30                30  30
ELIG-STAT 001                001                002  002
SOC-AMT
CERT-DAY
OHC          N                N                N      N
RESTRICT
MEDICARE
HCP1-NUM
HCP1-STAT
OPTION HE < PRESS PF13 FOR LIST OF VALID OPTIONS > * PRESS ENTER KEY TO RETURN
  
```

Continued on next page

Recipient Inquiry Request, Continued

**HAP Inquiry
Menu Screen**

Step 3

The resulting Health Access Programs Inquiry Menu (HEMI screen) is displayed. The MEDS ID field is populated with the MEDS ID from the INQM screen. Only the MEDS ID field (rather than the CIN field) will be populated when the user enters the HEMI screen in this manner.

| | |
|--|---|
| HEMI ** HEALTH ACCESS PROGRAMS (HAP) INQUIRY MENU ** BTP - 03/08/00 | |
| SELECT INQUIRY OPTION ? | C = CCS INQUIRY G = GHPP INQUIRY |
| CLIENT IDENTIFICATION: (ENTER ONE) | CLIENT-INDEX-NO: _____ MEDS-ID: 154 02 1152 |
| FOR DETAILED EXPLANATIONS OF THE INQUIRY OPTIONS LISTED PRESS PF13 | |

HAP Eligibility

To view HAP eligibility for a CCS client, access the View CCS Information screen.

| Step | Action |
|------|--|
| 1 | Type "C" at the Inquiry Option. |
| 2 | Type the MEDS ID or Client Index Number for the CCS Client. Press <Enter>. |

Continued on next page

Recipient Inquiry Request, Continued

**View CCS
Information
Screen**

The “View CCS Information” screen will display MEDS and HAP information for CCS

```

*** VIEW CCS INFORMATION *** BSU - 03/14/00

DOE , JANE T DOB: 11-23-1971 MEDS-ID:131 11 1111
C/O BARBARA DOE SEX: F CIN: 92343434A
9999 ALMOND STREET CURR-MCARE-STATUS: HIC-NO:
CHICO 95928 BIC-ISSUE: 05-07-98 PAPER-ISSUE:
DEATH-DT: DEATH-CD: KNOWN-TO-CMS: 1 NOTIFY-CMS: Y
BENE-PHONE: (530) 978-4343 CURR-OHC: K
PGM: M C H 1 2 3 FS CW

CCS DATA: # SEGMENTS RETURNED: 010 # SEGMENTS FOUND: 010
          AID CODE COUNTY START DATE END DATE
          9K 34 01/01/2000 01/31/2000
          9K 34 12/01/1999 12/30/1999
          9M 34 11/01/1999 11/30/1999
          9N 43 09/10/1999 09/15/1999
          9K 43 08/01/1999 09/09/1999
          9K 43 06/01/1999 07/31/1999
          9K 43 06/01/1998 05/31/1999
          9K 43 06/01/1997 05/31/1998
          9K 43 06/01/1996 05/31/1997
          9K 43 06/01/1995 05/31/1996
REQUESTED-ID: 92343434A PF13 = HELP

ACTION _ (N = NEXT, P=PREV, G = HAP INQUIRY MENU, M = MEDS INQUIRY)

```

Action Values

| Action | Definition |
|----------------------|--|
| N =NEXT: | Will display the next page of CCS or GHPP HAP segments found (if any additional segments to display). |
| P = PREV: | Will display the previous page of CCS or GHPP HAP segments (if a previous page had already been displayed). |
| G =HAP INQUIRY MENU: | Will return to the HAP Inquiry Menu. |
| M =MEDS INQUIRY: | Will display the MEDS PRIMARY MEDI-CAL/CMSP INFORMATION screen (INQM) for the given MEDS ID. From this screen, the user can then view all of the other MEDS screens. |

Continued on next page

Recipient Inquiry Request, Continued

Request CCS Information

The following can occur:

1. If data is NOT found for the requested ID on both MEDS and HAP, then error message 251 will display on the Health Access Programs (HAP) Inquiry Menu screen.
2. If data IS found on MEDS but NOT on HAP for the requested ID, then the MEDS data will be displayed on the View CCS/GHPP Information screen. No error message will display.
3. Conversely, if data IS found on HAP but NOT on MEDS for the requested ID, then the HAP data will display on the View CCS/GHPP Information screen.

Error message 250 will display stating that the requested ID was not found on MEDS. This will indicate that there is a problem since all IDs found on HAP should also be found on MEDS.

Cross Reference Search

1. When the user enters a CIN, the system searches the HAPDB and the CIN cross-reference file (CINXREF).
2. Once found on the CINXREF, the MEDS ID from the CINXREF will be used to search the MEDS Data Base (MEDSDB). The located CIN may or may not match the entered CIN.
3. The “View CCS Information” screen will display the MEDS CIN in the CIN field and the entered CIN in the REQUESTED-ID field.
 - If the MEDS CIN differs from the entered CIN, message “254 ACTIVE MEDS CIN DIFFERENT FROM REQUEST CIN” will display.
 - The user can initiate another inquiry request using the MEDS CIN if desired.

Continued on next page

Recipient Inquiry Request, Continued

**HEMI Screen
Functionality**

Below is information regarding HEMI screen functionality:

| If... | Then... |
|---|--|
| When the user enters both a CIN and a MEDS ID, | The entered CIN will be used for the inquiry. |
| When the user enters a MEDS ID, | The system will search the MEDS database (MEDSDB). Once found, the active CIN from the MEDS data base will then be used to search the Health Access Program database. |
| When a value other than "C" or "G" is entered in the "SELECT INQUIRY OPTION" field, | Error message "024 SPECIFY VALID OPTION" will display. |
| When no value is entered in the "SELECT INQUIRY OPTION", | Error message "010 REQUIRED FIELD MISSING" will display. |
| When no value is entered in either the CLIENT INDEX NO or MEDS-ID field, | Error message "010 REQUIRED FIELD MISSING" will display. |
| When the PF13 key is pressed, | A Help screen will display. |

Continued on next page

Recipient Inquiry Request, Continued

**New Online
HEMI Error
Messages**

Below is a list of the new HEMI error messages:

| Message No | Message Text |
|-------------------|--|
| 250 | NO RECORD FOUND ON MEDS |
| 251 | NO RECORD FOUND ON MEDS AND HAP |
| 252 | HAP SYSTEM UNAVAILABLE |
| 253 | HAP SYSTEM UNAVAILABLE NO RECORD FOUND ON MEDS |
| 254 | ACTIVE MEDS CIN DIFFERENT FROM REQUEST CIN |

INWA Request Screen

Overview

The Online Worker Alert Inquiry screen (INWA) provides a summary of all system alerts and problems that were identified for the query based on the specific entries made. The system provides a mechanism for problem resolution and transaction history for immediate access by counties and state.

The system does not delete messages when an error situation is resolved, but continues to display all messages until purged. INWA is routinely purged and only the most recent 90 days of alerts will display.

User Differences

Use of the INWA function is varied based on the user.

Eligibility Workers:

An Eligibility Worker may only be interested in alerts for a specific beneficiary. Entering only the MEDS-ID will obtain information for that individual.

In addition, that worker may want to see all alerts for his/her worker number for a given date. Entering the COUNTY numeric code and worker number may be sufficient.

Specialized Workers:

Specialized workers may want to clear a specific message type and/or message number *with or without* entry of a creation date. This process would provide an on-line listing of cases requiring action for use instead of printed reports.

Supervisory Staff:

For supervisory/administrative staff, use of the various fields provides a method to monitor staff work as well as to identify problem trends for training or corrective action.

Continued on next page

INWA Request Screen, Continued

Access the INWA Request Screen

The INWA inquiry request screen is accessed in one of the following ways:

- Select option "A" from the MEDS Inquiry Request
- Type "INWA" on a blank MEDS screen
- Press the <PF20> or <Shift F8> function key.
- From any other MEDS inquiry screen, type "WA" in the OPTION field at the bottom of that inquiry screen.

```

INWA      * REQUEST FOR ONLINE WORKER ALERT INQUIRY *      IBF      MM/DD/YY

      REQUIRED ENTRY: COUNTY AND WORKER, OR COUNTY AND SERIAL, OR MEDS-ID
      ----- FOR HELP - PRESS PF13 -----
COUNTY:  (1)
MEDS-ID:  (2)
DIST:     (3)  WORKER: (4)
CREATION DATE:  (5)
SOURCE:   (6)      HCP:  (7)
REPORT TYPE:   (8)      (MED OR CDB)
                  (DAILY, RENEW, RECON, SSN, BUYIN, EDWRD)
MSG TYPE:     (9)      (REJECT, ACCEPT, ALERT, URGENT, ACTION, HOTLINE)
MSG NUMBER:   (10)
press clear to quit.
    
```

Continued on next page

INWA Request Screen, Continued

Data Elements

| Field # | Name | Definitions and Instructions |
|----------------|---------------|--|
| (1) | COUNTY | To view all messages for a county, enter county code only. ➤ Not recommended for very small counties as the listing will be too large and not easily useable. |
| (2) | MEDS-ID | To view all messages for one MEDS-ID, enter only the MEDS-ID. To limit the search by county, enter the County code (1) as well. Includes all messages created on this MEDS-ID for this recipient. |
| (3) | DIST | To view messages specific to a district office in a county, enter the DIST code and the County code (1). All cases assigned to this district will display. ➤ If a county does not input the DIST code routinely to MEDS, this search method is not practical. |
| (4) | WORKER | To view messages for a specific worker in a county, enter the WORKER code and the County code (1). |
| (5) | CREATION DATE | When a search by specific date is needed, enter the creation date. All messages for that day will display. To refine the search, use the fields (1) through (4) to refine. |
| (6) | SOURCE | To search on a source type, enter the code in this field. This is more practical for functions other than a county. |
| (7) | HCP | To search on a health plan, enter the plan number. Refine the search using one of the fields above. |
| (8) | REPORT TYPE | To search by report type, enter one of the listed types. Refine the search using one of the fields above. |
| (9) | MSG TYPE | To search by a specific message type, enter one of the listed types. Refine the search using one of the fields above. |
| (10) | MSG NUMBER | To search by a specific message number, enter the desired number. Refine the search by using one of the fields above. |

INWA Summary Screen

Overview

When using the MEDS INWA summary screen:

- If your search returns one summary screen, press <Enter> to return to the INWA Menu screen.
- If your search criteria returns multiple summary screens, press <Enter> or <PF8> to scroll forward. Press <PF7> key scroll backward.
- At the last summary screen, press < Enter > to return to the INWA menu screen.
- To return to the INWA menu screen before you reach the last summary screen, press <PF3>.
- To move to any of the inquiry screens for this individual, enter the last two characters of that screen name after the OPTION field.
- You can view the detail INWA screen for any of the transactions listed on the summary INWA screen by typing "S" in field #13.

| INWA | | MEDS ONLINE WORKER ALERT SUMMARY | | | | IBF | | MM/DD/YY | | |
|-----------------------------------|-------|----------------------------------|--------------|----------------|--|----------|--|----------|--|--|
| COUNTY: (1) | | DISTRICT: (2) | | WORKER: (3) | | HCP: (4) | | | | |
| ===== | | | | | | | | | | |
| CASENAME: (5) | | PERSON NAME: (6) | | | | | | | | |
| COUNTY ID: (7) | | MEDS ID: (8) | | BIRTHDATE: (9) | | | | | | |
| ===== | | | | | | | | | | |
| DATE | TRANS | SOURCE | MESSAGE----- | | | | | | | |
| (10) | (11) | (12) | (13) | (14) | (15) | | | | | |
| OPTION __ < PRESS PF13 FOR LIST > | | | | | RETURN: ENTER DETAIL: "S" AND ENTER | | | | | |

Continued on next page

INWA Summary Screen, Continued

Data Elements

| Field # | Name | Definitions and Instructions |
|---|-------------|---|
| (1) | COUNTY | The number code for the county. |
| (2) | DISTRICT | The county's district office code if available. |
| (3) | WORKER | The Eligibility Worker (EW) number if available. |
| (4) | HCP | The HCP number if available. |
| The following information will display for each record found matching the search criteria. | | |
| (5) | CASE NAME | Payee name for the case. |
| (6) | PERSON NAME | Name of client (Last, First, Initial) |
| (7) | COUNTY ID | County number, aid code, seven-digit serial number, FBU and person number. For CCS Client, County ID is the Responsible County code, the CCS Aid code, and the number '9' and the CIN. |
| (8) | MEDS ID | Client's SSN or a MEDS assigned pseudo number SSN if the SSN is unknown. |
| (9) | BIRTHDATE | The recipient's date of birth. |
| (10) | DATE | Date of the transaction that created the INWA listing. |
| (11) | TRANS | The transaction code that created the INWA listing. |

Continued on next page

INWA Summary Screen, Continued

Data Elements (continued)

| Field # | Name | Definitions and Instructions |
|----------------|---------------------------|---|
| (12) | SOURCE | The transaction source that created the INWA listing. |
| (13) | Detail Request | Enter an “S” in this field if you wish to see the detail for this INWA listing. |
| (14) | ERROR MESSAGE NO | The error message number for this entry. See appropriate Appendix. |
| (15) | ERROR MESSAGE DESCRIPTION | The description of the error message for this entry. See appropriate Appendix. |

INWA Detail Screen

Overview

The Detail INWA screen is accessed from the Summary INWA screen.
Press <PF13> to return to the Summary INWA screen.

To see another Inquiry screen for this individual enter the last two characters of the screen name after the OPTION field and press <Enter>.

| INWA | | MEDS ONLINE WORKER ALERT INQUIRY | | | | IBF | MM/DD/YY |
|------------|-------------------------|----------------------------------|---------|--------------------------------------|----------|------------|-------------|
| ***** | C O N F I D E N T I A L | ***** | * * * * | DAILY | MEDI-CAL | ALERT | * * * * |
| TRAN-CODE: | (1) | SOURCE: | (2) | CREATE DATE: | (3) | DIST: | (4) EW: (5) |
| CASENAME: | (6) | | | PERSON-NAME: | (7) | | |
| COUNTY-ID: | (8) | | | MEDS-ID: | (9) | BIRTHDATE: | (10) |
| (11) | (12) | | | | | | (13) |
| DED | DATA-ELEMENT | | | CONTENTS | | | |
| (14) | (15) | | | (16) | | | |
| OPTION | < PRESS PF13 FOR LIST > | | | RESUME SCROLL: ENTER OR ENTER OPTION | | | |

Continued on next page

INWA Detail Screen, Continued

Data Elements

| Field # | Name | Definitions and Instructions |
|----------------|-------------|---|
| (1) | TRAN-CODE | Code-name for the submitted transaction that created the listing on INWA. |
| (2) | SOURCE | The source of the transaction. |
| (3) | CREATE DATE | The date that the transaction was entered on the INWA transaction. |
| (4) | DIST | County district code. |
| (5) | EW | The Eligibility Worker's number. |
| (6) | CASENAME | Payee name for the case. |
| (7) | PERSON-NAME | Name of client (Last, First, Initial) |
| (8) | COUNTY-ID | County number, aid code, seven-digit serial number, FBU and person number. For CCS Client, County ID is the Responsible County code, the CCS Aid code, and the number '9' and the CIN. |
| (9) | MEDS-ID | Client's SSN or a MEDS assigned pseudo number SSN if the SSN is unknown. |
| (10) | BIRTHDATE | Date of birth for this recipient. |

Continued on next page

INWA Detail Screen, Continued

Data Elements (continued)

| Field # | Name | Definitions and Instructions |
|----------------|---------------------------|--|
| (11) | ERROR MESSAGE NUMBER | The error message number identified with the transaction. See appropriate Appendix for more detail. |
| (12) | ERROR MESSAGE DESCRIPTION | The error message description identified with the transaction. See appropriate Appendix for more detail. |
| (13) | ERROR MESSAGE ACTION | The action code identified to the error message. See appropriate Appendix for more detail. |
| (14) | DED NUMBER | The data element number that is identified with the error message number. See Appendix B DED or more detail. |
| (15) | DED DESCRIPTION | The description of the data element number. See Appendix B DED or more detail. |
| (16) | DED VALUE | The value that was input for the data element. See Appendix B DED or more detail. |

Help Menus

Overview

When the user presses the PF13 key from the MEDS Inquiry menus or the MEDS Online Worker Alert Summary screen (INWA), a help screen is displayed.

This screen lists the valid options for transferring to another MEDS screen. The help screen will display “HE = HAP Inquiry Menu” as a valid option.

- ➡ The MEDS INQE inquiry screen displays the CMS Indicator (Data Element 2625) and CMS Notification flag (Data Element 2626) fields.

INQE Screen Help Menu

Below is a sample INQE screen with help menu.

```

INQE          ** OTHER CLIENT ELIGIBILITY INFORMATION **          BTP - 03/24/00

MEDS-ID 154-02-1152          BIRTHDATE 09-05-1969          CLIENT-INDEX-NO 90002960D 8
NAME KDELO          , ADDCUR      M          PHONE

ELIG-A +-----+
EXPECT |          *** Valid Options ***          |          SSI-LAST-RECEIVED
DEATH- | XH = HIC-No Xref Rpt          |          PICKLE-TICKLER
      | XM = MEDS-ID Prev Used Rpt          |          LAST-PICKLE-CHG
SSN-VE | XN = Name Xref Rpt          |          ALIEN-ELIG
ETHNIC | XX = Client Index Xref Rpt          | Y          ALIEN-SPONSOR-STAT
LANGUA |          |          IN          ALIEN-NO
      | Worker Alert Inquiries          |
PGM:   | HD = Hold Alerts          | 3          FS          CW C H
      | WA = Worker Alerts          | =====>
      |          |          UN JUL AUG SEP OCT NOV DEC
ORIG-A | Other Inquiries          |
NEG-AC | HI = HIS Action Request Menu          |
MULTI- | HE = HAP Inquiry Menu          |
RES-CO |          |
HF-DAY | Press CLEAR to return          |
ST/FED | F7=Prev F8=Next          |
      +-----+{More +- }-+
OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST
  
```

Continued on next page

Help Menus, Continued

**INWA Screen
Help Menu**

Below is a sample of the MEDS Online Worker Alert Summary INWA screen with help menu:



| | | | | | |
|--------------------------|-------------------------|----------------------------------|----------------------|---------------------------------|--|
| INWA | | MEDS ONLINE WORKER ALERT SUMMARY | | BTP 03/24/00 | |
| COUNTY: 04 | | DISTRICT: TST | | WORKER: ROSE HCP: | |
| ===== | | | | | |
| CASENAME: CIN XERF N SCI | | PERSON NAME: MULTI CIN | | , ALERT T | |
| COUNTY +----- | | 64-0202 | | BIRTHDATE: 04/13/1975 | |
| *** Valid Options *** | | | | | |
| DATE | | XH = HIC-No Xref Rpt | | ----- | |
| 01/09/ | | XM = MEDS-ID Prev Used Rpt | | -ID CONFLICT - MEDS-ID CHAN URG | |
| | | XN = Name Xref Rpt | | | |
| | | XX = Client Index Xref Rpt | | | |
| | | Worker Alert Inquiries | | | |
| | | HD = Hold Alerts | | | |
| | | WA = Worker Alerts | | | |
| | | Other Inquiries | | | |
| | | HI = HIS Action Request Menu | | | |
| | | HE = HAP Inquiry Menu | | | |
| | | Press CLEAR to return | | | |
| | | F7=Prev F8=Next | | | |
| +-----{More -+ }-+ | | | | | |
| OPTION | < PRESS PF13 FOR LIST > | | PF3=RETURN, PF8=NEXT | | |

MEDS Alerts

MEDS Alerts Reports

MEDS alerts are available in hard copy format as shown in the example below.

The hardcopy alerts are the same ones that appear on the MEDS screens “MEDS Online Worker Alert Summary” and “MEDS Online Worker Alert Inquiry”. The reports will be mailed on a daily basis to the attention of the CCS Administrator in each county.

The alert reports will be sorted by:

1. **District** – the county code or regional office code (NCR, SCR, or SRO) of the last user who updated the patient record in CMS Net.
2. **Worker** – the worker code of the last user who updated the patient record in CMS Net.
3. **CIN**

Continued on next page

MEDS Alerts, Continued

**CCS Daily
Alerts Screen**

```

STATE OF CALIFORNIA - DEPARTMENT OF HEALTH SERVICES
MEDI-CAL ELIGIBILITY DATA SYSTEM                STATE WORKER ALERT REPORT
          * * * * CCS DAILY ALERTS * * * *

REPORT NO:   RS-MED110-R002                OFFICE:   CCS
PRINT DATE:  03/13/2001                    DISTRICT:  43
PAGE:        17                            WORKER:   AJ89

===== C O N F I D E N T I A L =====

CASE-NAME          PERSON-NAME RECORDC      , CMSTHREE   E
COUNTY-ID  43-9K-9900018-5-7S  MEDS-ID  656-01-0052  BIRTHDATE  04/15/1987

TRANSACTION-CODE  GZ20          SOURCE    003          CREATION-DATE  03/13/2001

MESSAGE
2130  DECEASED PER MEDS - CONTACT YOUR MEDS LIAISON          *URGENT*

DED#      DATA-ELEMENT          CONTENTS
2015      MEDS    DATE OF DEATH      03/01/2001
2019      MEDS    DEATH INFO SOURCE   V
9109      TRANS   ESAC CURR           1
0150      TRANS   TERM-DATE           /   /
0185      TRANS   TERM REASON

CASE-NAME          PERSON-NAME RECORDS      , CMSNINETEE A
COUNTY-ID  43-9K-9900018-7-3S  MEDS-ID  656-01-0068  BIRTHDATE  07/09/1993

TRANSACTION-CODE  GZ20          SOURCE    006          CREATION-DATE  03/13/2001

MESSAGE
1503  CLIENT INDEX NUMBER/MEDS-ID CONFLICT          *URGENT*

DED#      DATA-ELEMENT          CONTENTS
H064      TRANS   HDR CIN          90001873S
H054      TRANS   HDR MEDS-ID      656010068
X002      XREF    MEDS-ID          656010047

```

Results of MEDS Updates

Overview

This section displays screen samples with the resulting MEDS updates. Affected fields are bolded.

INQM Screen

Resulting MEDS updated fields are **bolded**.

```

INQM                ** PRIMARY MEDI-CAL/CMSP INFORMATION **          BWR - 03/30/01

CASE-NAME                                DISTRICT                PADILLA           , JOVITA
COUNTY-ID 33-9M-                      - -                      EW-CODE
MEDS-ID 401-17-0119  SSN-VER 1  REDETERM-MO          1321 3RD ST
BIRTHDATE 01-15-1992  SEX F      GOVT-RESP 6        LOS OSOS                CA 93402
CHAINED-ID                                LAST-MC/CP-CHG          ADDRESS-FLAG A  RES-COUNTY 33
PRIOR-MEDS-ID                          LAST-OTH-CHG 03-29-01  APDP      PICKLE      RECOVERY
WELFARE-PGM 001  DEATH-DT                DEATH-CD      TERM-DT                TERM-REAS
CIN 90720101A 2    HIC-NO                BIC-ISSUE 03-29-01  PAPER-ISSUE
PGM:  M      1                2                3                FS                CW
                                2001=====> 2000=====>
      04-01  PEND  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC
COUNTY      33
AID-CODE     9M
ELIG-STAT    999
SOC-AMT
CERT-DAY
OHC          N
RESTRICT
MEDICARE
HCPI-NUM
HCPI-STAT
OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * PRESS ENTER KEY TO RETURN
  
```

Continued on next page

Results of MEDS Updates, Continued

INQE Screen

Other Client Eligibility Information screen.

Resulting MEDS updated fields are **bolded**.

```

INQE          ** OTHER CLIENT ELIGIBILITY INFORMATION **          BWR - 03/30/01

MEDS-ID 401-17-0119          BIRTHDATE 01-15-1992          CLIENT-INDEX-NO 90720101A 2
NAME PADILLA          , JOVITA          PHONE (916) 925-1789

ELIG-APPROVAL-DATE          SSI-LAST-RECEIVED
EXPECTED-DELIVERY-DATE          PICKLE-TICKLER
DEATH-POSTED          CMS-INDICATORS 1Y          LAST-PICKLE-CHG

SSN-VER-BIRTHDATE          REF/ALIEN-IND          ALIEN-ELIG
ETHNIC 7          INS-ENTRY-DATE          ALIEN-SPONSOR-STAT
LANGUAGE 5          COUNTRY-OF-ORIGIN          ALIEN-NO

PGM:  M          1          2          3          FS          CW
          2001=====> 2000=====>
          04-01 PEND  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC
ORIG-AID
NEG-ACTN
MULTI-SOC
RES-COUNTY 33
HF-DAYS
ST/FED-IND

OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST
    
```

Continued on next page

Results of MEDS Updates, Continued

INQA Screen MEDS Address Information screen.
Resulting MEDS updated fields are **bolded**.

| | | | | |
|--|--------------------------------------|-----------|----------------------|----------------|
| INQA | ** MEDS ADDRESS INFORMATION ** | | | BWR - 03/30/01 |
| MEDS-ID 401-17-0119 0 | PADILLA | , JOVITA | BIRTHDATE 01-15-1992 | |
| CURRENT RESIDENCE ADDRESS | 1321 3RD ST | | FLAG A | |
| | LOS OSOS CA 93402-1117-21 9 | | RESID IND Y | |
| | PHONE (916) 925-1789 | | RESIDENCE-COUNTY 33 | |
| PENDING RESIDENCE ADDRESS | | | FLAG | |
| | PHONE | RESID IND | RESIDENCE-COUNTY | |
| CURRENT MAILING ADDRESS | JOHN AND MARY PADILLA | | FLAG A | |
| | 744 P ST | | | |
| | SACRAMENTO CA 95814-6413-99 1 | | FLAG A | |
| PENDING MAILING ADDRESS | | | FLAG | |
| OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST | | | | |

Continued on next page

Results of MEDS Updates, Continued

INQD Screen Change Dates and Authorized Rep Information Screen,
Resulting MEDS updated fields are **bolded**.

| | | |
|--|----------------------|----------------------------------|
| INQD ** CHANGE DATES AND AUTHORIZED REP. INFORMATION ** BWR - 03/30/01 | | |
| MEDS-ID 401-17-0119 | BIRTHDATE 01-15-1992 | CLIENT-INDEX-NO 90720101A 2 |
| PADILLA , JOVITA | | CA-DL/ID-NO |
| CURRENT | | |
| AUTHORIZED | | |
| REPRESENTATIVE | | |
| | | FLAG |
| LAST-MC/CP-CHG | LAST-FS-CHG | LAST-OTHER-CHG 03-29-2001 |
| LAST-MC/CP-TRANS | LAST-FS-TRANS | LAST-OTHER-TRANS GZ20 B |
| FILE-FIX-DATE | | |
| OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST | | |

Continued on next page

Results of MEDS Updates, Continued

INXC Screen

County ID Cross Reference Report Screen.
Resulting MEDS updated fields are **bolded**.

| | | |
|--|--|----------------|
| INXC | ** COUNTY-ID CROSS REFERENCE REPORT ** | BWR - 03/30/01 |
| MEDS-ID = 401-17-0119 | | |
| COUNTY-ID | COUNTY-ID | COUNTY-ID |
| 19-9M-9-90720101A | | |
| OPTION ____ < PRESS PF13 FOR LIST OF VALID OPTIONS > * ENTER KEY RETURNS TO LIST | | |

Continued on next page

Results of MEDS Updates, Continued

INXN Screen

Name Cross Reference Report by name screen.

Resulting MEDS updated fields are **bolded**.

| | | | | | | |
|-----------------------|-----------------------------------|---|------------|-----------|----------------|--|
| INXN | ** NAME CROSS REFERENCE REPORT ** | | | | BWR - 03/30/01 | |
| MEDS-ID = 401-17-0119 | | | | | | |
| LAST-NAME | FIRST-NAME | I | BIRTHDATE | NAME-CODE | COUNTY | |
| PADILLA | JOVITA | | 01/15/1992 | | 33 | |
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